24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Ending Spending Action Fund	
	C C00489856
Check if 24-hour report X 48-hour report New report Amends report filed	d on M M M / D D / Y Y Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Neylan & Partners	03 24 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 9401 Brookmay Court	Amount
City State Zip Code	8000.00
Alexandria VA 22309	Transaction ID : SE.5246 Date of Disbursement or Obligation
Purpose of Expenditure media placement Category/ Type	03 18 2014
Name of Federal Candidate Support Offic	e Sought: X House District: 03
Walter B. Jones Oppose	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought Disb. 2014	ursement For:
Full Name of Payee Rick Reed Media, Inc.	Date of Public Distribution/Dissemination
Mailing Address	03 24 2014
Mailing Address 2601-A Wilson Blvd.	Amount
City State Zip Code	2413.55
Arlington VA 22201	Transaction ID : SE.5245 Date of Disbursement or Obligation
Purpose of Expenditure media production Category/ Type	03 / 24 / Y 2014
Name of Federal Candidate Support Office	e Sought: X House District: 03
Walter B. Jones Oppose	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought Disb 2014	ursement For:
-	
(a) SUBTOTAL of Itemized Independent Expenditures	10413.55
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	10413.55
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
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Signature	